

| POSITION                  | INITIALS   | ID NO.      | DATE                 |
|---------------------------|------------|-------------|----------------------|
| FEE DETERMINATION         | 110 N      |             | 10-12-01             |
| O.I.P.E. CLASSIFIER       |            | 49          | 10/26/01             |
| FORMALITY REVIEW          |            |             |                      |
| RESPONSE FORMALITY REVIEW | E-H<br>H-L | 713<br>1071 | 11-08-01<br>03/12/02 |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Date     |
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| Final | Original |
| 1     | 10/12/01 |
| 2     | ✓        |
| 3     | ✓        |
| 4     |          |
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| Claim | Date     |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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6/13/02  
3-15-02